Useful Contact Details

	Name	Telephone
GP		
Asthma nurses		
Other healthcare		

Information and Support

Asthma and Lung UK

Advice Line: 0300 222 5800

Open Monday – Friday 9am – 5pm

NHS direct: 111

Smoking cessation advice:

Web: www.asthmaandlung.org.uk

Email: helpline@asthmaandlunguk.org.uk

Contact your GP or your Asthma nurse

https://www.asthmaandlung.org.uk/living-

with/stop-smoking



Inhaler technique with mask



Breathing difficulty



Inhaler technique with mouthpiece



Discharge / escalation advice



Spacer care





Asthma / Viral Induced Wheeze Management

Name	
D.O.B.	
Hospital no:	
Date of issue	

This Asthma and Viral Induced Wheeze Management Plan explains your child's asthma medications, how to recognise when their asthma or wheeze is getting worse and what to do. Take this plan with you and discuss any concerns you have when you meet your child's nurse, GP or hospital doctor. It is important that asthma treatment is reviewed at least every twelve months and this plan is kept up-to-date.

Regular treatment

Name of inhaler and	Dose :	Dose:		
strength	Morning	Evening		
Preventer:				
Brown/orange/purple/red				
Rinse mouth or brush teeth after use				
Other asthma medications				

Take as needed

Reliever:	Please follow flowchart or as directed by respiratory team.	
Salbutamol (blue)	If directed take puffs 10-15 minutes before exercise.	

Remember to use the Spacer! - only one puff at a time

Your child's Asthma is under control if:

- The blue inhaler, salbutamol is needed three times a week or less.
- They have very few/no asthma symptoms wheezing, coughing, shortness of breath.
- They can do all their normal activities without symptoms.

ACTION

 Do not stop your child's regular asthma medicines unless discussed with your GP / Asthma nurse.

WHAT DO I DO WHEN MY CHILD IS...

- Coughing or wheezing more than usual.
- Waking up at night with asthma symptoms.
- Needing to use their blue inhaler more than usual.
- Has a cold.
- Additional symptoms

ACTION - Asthma flare/wheeze attack

- Follow Discharge / Escalation Flow Chart.
- If requiring up to 6 puffs blue inhaler every 4 hours or their asthma symptoms are getting worse please contact your GP or Practice Nurse today for advice.

IT IS AN EMERGENCY IF YOUR CHILD IS...

- Breathing very fast and are using their neck or stomach muscles to breathe.
- Too breathless to talk, eat or drink.
- Tired, pale or blue around the lips.

ACTION - YOU MUST SEEK MEDICAL ADVICE IMMEDIATELY - DIAL 999

Whilst you are waiting for the ambulance give your child 10 puffs (1 puff at a time) of the blue inhaler using the spacer. You can continue to give 1 puff every minute until help arrives.

Discharge / Escalation advice

Review your child. Are they breathless or wheezy? Do they have increased work of breathing?





YES

Give <u>2 puffs</u> of blue inhaler one at a time using a spacer. Review their response after 10 minutes. If they are not improving give another <u>2 puffs</u> and reassess. If they are still not getting better, repeat up to a maximum total dose of <u>10 puffs</u> and reassess



No need for any blue inhaler. Continue to review them <u>at</u> least every 4 hours



Are you still concerned about your child's breathing?



YES

Give up to 10 puffs of blue inhaler one at a time using a spacer

SEEK URGENT HELP

CALL 999 or ATTEND WORCESTERSHIRE

ROYAL EMERGENCY DEPARTMENT



Assess again regularly at least every 4hours and repeat the process

IF REQUIRING 10 PUFFS ON TWO SEPARATE OCCASIONS WITHIN 24 HOURS SEEK MEDICAL ADVICE

You might need to give some blue inhaler every 4 hours initially. Your child should need less as they recover. You should see an improvement within 48 hours. If your child is regularly requiring the blue inhaler 5 days after discharge, please see your GP for review.

IF YOU ARE CONCERNED ABOUT YOUR CHILD OR THEY NEED MORE THAN 10 PUFFS WITHIN 4 HOURS YOU MUST SEEK URGENT MEDICAL HELP VIA 111, YOUR GP OR BY GOING STRAIGHT TO WORCESTERSHIRE ROYAL EMERGENCY DEPARTMENT.

Call 999 if your child has severe symptoms